

APPLICATION DATA SHEET

Application Information

Application Number::
Filing Date:: Herewith
Application Type:: Regular
Subject Matter:: Utility
CD-ROM or CD-R?::
Number of CD Disks::
Number of Copies of CDs::
Sequence Submission?::
Computer Readable Form (CRF)?::
Number of Copies of CRF::
Title:: Evaluating Employee Benefit Plans
Attorney Docket Number:: FMR-001
Request for Early Publication?:: No
Request for Non-Publication?:: No
Suggested Drawing Figure::
Total Drawing Sheets:: 14
Small Entity?:: No
Licensed US Govt. Agency::
Contract or Grant Numbers::
Secrecy Order in Parent Appl.?::

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Christopher
Middle Name:: Todd
Family Name:: Burt
Name Suffix::
City of Residence:: West Jordan

State or Province of Residence:: UT
Country of Residence:: US
Street of Mailing Address:: 1568 Erickson Park Drive
City of Mailing Address:: West Jordan
State or Province of Mailing Address:: UT
Country of Mailing Address:: US
Postal or Zip Code of Mailing Address:: 84084

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Carolyn
Middle Name:: Mary
Family Name:: Clancy
Name Suffix::
City of Residence:: Chelmsford
State or Province of Residence:: MA
Country of Residence:: US
Street of Mailing Address:: 32 Empire Street
City of Mailing Address:: Chelmsford
State or Province of Mailing Address:: MA
Country of Mailing Address:: US
Postal or Zip Code of Mailing Address:: 01824

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Mary
Middle Name:: Elizabeth
Family Name:: Cusick
Name Suffix::
City of Residence:: Brookline
State or Province of Residence:: MA

Country of Residence:: US
Street of Mailing Address:: 77 Pond Avenue #1411
City of Mailing Address:: Brookline
State or Province of Mailing Address:: MA
Country of Mailing Address:: US
Postal or Zip Code of Mailing Address:: 02445

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Joseph
Middle Name::
Family Name:: Freitas
Name Suffix::
City of Residence:: Hingham
State or Province of Residence:: MA
Country of Residence:: US
Street of Mailing Address:: 3 Saw Mill Pond Road
City of Mailing Address:: Hingham
State or Province of Mailing Address:: MA
Country of Mailing Address:: US
Postal or Zip Code of Mailing Address:: 02043-3457

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Janet
Middle Name:: Alice
Family Name:: Roberts
Name Suffix::
City of Residence:: Waltham
State or Province of Residence:: MA
Country of Residence:: US

Street of Mailing Address:: 238 Ash Street
City of Mailing Address:: Waltham
State or Province of Mailing Address:: MA
Country of Mailing Address:: US
Postal or Zip Code of Mailing Address:: 02453-5803

Correspondence Information

Correspondence Customer Number:: 021323

Representative Information

Representative Customer Number:: 021323

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application		0#/###,###	MM/DD/YY

Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::
		MM/DD/YY	

Assignee Information

Assignee Name::

City of Mailing Address::

State or Province of Mailing Address::

Country of Mailing Address::